

APRIL 15, 2002

The Navigator

Waukesha County Veterans' Services

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FEDERAL, STATE & LOCAL BENEFITS UPDATE

NEWS UPDATE FOR FEDERAL BENEFITS



VA Raises Education Reimbursement Levels for Veterans

The following information was taken from DVA News Release of January 23, 2002

WASHINGTON—The Department of Veterans Affairs (VA) is providing veterans a major boost in the monthly educational payments offered under the Montgomery GI Bill.

Concerned about the under use of Montgomery GI Bill benefits by eligible veterans, VA supported an increase in reimbursement rates well above the normal cost-of-living increases because these annual adjustments have not kept pace with rising college education costs.

“Under legislation signed by President Bush, we now are on track to gain the tuition spending power veterans expect,” VA Secretary Anthony J. Principi said. “We are coupling a series of robust payment increases over the next two years with innovative programs that will help prepare today’s service member with the education needed for tomorrow’s job market.”

At the top tier for full-time studies, the tuition reimbursement rate rises from \$672 to \$800 per month, almost 20 percent. That will jump to \$900 next fall and \$985 in October 2003. Rates are adjusted for veterans enrolled part-time or for those with limited military service.

In addition to covering traditional two-year and four-year college studies, a new VA program taking effect next fall is aimed at high technology courses. It will allow veterans to use a lump sum from their benefit for certain expensive courses such as those leading to certification of computer network professionals.

Coverage of up to 60 percent of the cost of such high-tech courses will begin Oct. 1, 2002.

VA currently is developing regulations needed to launch this new program. The new law specifies a formula limiting it to expensive courses.

The increase in tuition reimbursement as well as the VA’s support for high-tech courses reflect department efforts to boost use of the current education program, which began in 1985. Veterans generally have ten years after release from active duty to use the funds, but only about 60 percent have used some of their benefit.

In addition, about 90 percent of all eligible veterans have not exhausted their account. VA hopes new strategies such as accelerated payment for high-tech courses will enable more veterans to take advantage of their remaining benefits.

Few servicemembers opt out of coverage. Participants’ pay is reduced by \$100 per month for their first 12 months on active duty to cover a total veteran contribution of \$1,200. The full-time rate of \$800 a month is paid for up to 36 months of study, which covers the academic months of a traditional 4-year college education for a return value of \$28,800 at today’s top rate.

The new law, the Veterans Education and Benefits Expansion Act of 2001 (Public Law 107-103), also improves educational assistance for eligible spouses and children of certain veterans, including veterans who died or are permanently and totally disabled as a result of a service-connected disability.

For more information about veterans educational programs, call VA at 888-442-4551.

COMMENTARY CORNER By: John L. Margowski, Director

We have had several inquiries lately regarding prescriptions through the Veterans Administration (VA) hospitals and clinics

Please remember that the VA provides prescriptions to veterans as medical care for ongoing medical treatment.

To receive prescriptions through the VA as part of ongoing medical care, veterans must first be enrolled in the VA medical system.

Veterans can enroll through a County Veterans Service Office, have enrollment forms mailed to them or apply for enrollment at a VA facility. My office has an outline we will provide, upon request, listing the supporting evidence needed to accompany an application for enrollment.

At this time, all veterans seeking medical care for non-service connected disabilities are eligible to apply for enrollment. Enrollment is done every year, once the VA knows what the budget will be for the next fiscal year. Those veterans previously enrolled should receive their re-enrollment forms in the mail for the upcoming year.

When completing your enrollment/re-enrollment form be sure to check

Medical Care box, if you wish to use the VA medical facilities as well as **Enrollment** box on the top of the form.

Veterans must disclose all family income from the previous year. This is gross income from all sources, including a spouse, if the veteran is married. The form has a block the veteran can mark that states they do not wish to disclose financial information and that they will pay all applicable deductibles.

I recommend that you disclose financial information. When you go to the initial Primary Care appointment, you will need to provide the income information because the income threshold for the prescription co-pay is much lower than the threshold for medical care co-pays. The VA needs to determine who has to make the applicable co-payments.

The waiting time for the first initial Primary Care appointment is still in the eight to nine month range. The VA is working very hard to reduce waiting times. The VA does not have adequate staff to meet current veteran client demand.

Questions about Health Care Enrollment and VA medical care in general should be directed either to a County Veterans Service Office or the nearest VA Medical Facility.

Lastly, the VA does have a right to bill your private health insurance for non-service connected care that is provided. If the insurance company pays part of the bill, that payment is applied to the veterans required co-pay first. If that payment does not cover the total co-payment amount, the veteran will be billed for the difference. There is further information on co-payments in this newsletter.

For those of you who do not wish to use the VA medical system, I have some information regarding private pharmaceutical companies

that offer prescriptions for their product at a reduced cost for some individuals.

ELI LILLY and Company offers a \$12. flat fee for needy individuals. Beginning March 5, Medicare-enrolled seniors and disabled who meet eligibility requirements can apply for a LillyAnswers card by calling 1-877-RX-LILLY to request an application.

Program enrollment is free, and the application process takes two to four weeks. Participating pharmacies will begin accepting the card April 1, and once a patient receives a LillyAnswers card in the mail, he or she will be covered for 12 months for Lilly retail products purchased at participating pharmacies.

Pfizer Inc. also helps low-income Medicare beneficiaries with reduced cost prescriptions. Their program charges \$15 for each 30 day Pfizer prescription. Individuals can call 1-800-717-6005 to receive an application.

You can also go on the internet and search under the various pharmaceutical company names to see if other companies are offering such programs. If you do not have a computer, your local library should have a computer and staff to assist you with searching for information.



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If you have any questions or comments about the contents of the newsletter, please contact Waukesha County Veterans' Service Office at 262-548-7732.

VA Compensates More Veterans Exposed to Radiation

The following information was taken from DVA News Release of January 25, 2002

WASHINGTON—Secretary of Veterans Affairs (VA) Anthony J. Principi announced today the addition of five new cancers to the list of diseases presumed to be connected to the exposure of veterans to radiation during their military service. Veterans diagnosed with cancer of the bone, brain, colon, lung or ovary will have an easier time establishing entitlement to compensation for their illnesses beginning March 26, 2002.

“These veterans accepted the risks of duty and have borne the burden of their illnesses in service to our nation. They should not have to bear an additional and unequal burden to prove they deserve the benefits they’ve so rightfully earned. The new rules will not cure their cancers, but they will ease the burden of proof required to receive appropriate compensation for their disabilities,” Principi said.

The new rules apply to those veterans who participated in irradiation-risk activities while on active duty, during active duty for training or inactive duty training as a member of a reserve component.

The definition of radiation-risk activities has also been expanded to include service at Amchitka Island, Alaska, prior to January 1, 1974, if a veteran was exposed while performing duties related to certain underground nuclear tests. The new definition also includes service at gaseous diffusion plants located in Paducah, Ky., Portsmouth, Ohio and an area known as K25 at Oak Ridge, Tenn. The previous definition was limited to service members who took part in the occupation of Hiroshima or Nagasaki or onsite at atmospheric nuclear weapons, tests, or American POW’s interred in Japan during World War II. People in these groups are frequently called “atomic veterans”.

In 1988, Congress established a presumption of service connection for 13 cancers in veterans exposed to “ionizing radiation” with later changes bringing the number to 16.

Under current statutes, the following diseases are presumed to be service connected if the veteran participated in a radiation-risk activity: leukemia, (other than chronic lymphocytic leukemia), cancer of the thyroid, breast, pharynx, esophagus, stomach, small intestine, pancreas, gall bladder, bile ducts, salivary gland, or urinary tract, multiple myeloma, lymphomas (except Hodgkin's disease), primary cancer of the liver (except if cirrhosis or hepatitis B is indicated) or bronchiolo-alveolar carcinoma.

VA’s changes ensure equity between veterans and federal civilians who may be entitled to compensation for these cancers caused by radiation under comparable federal laws such as the Radiation Exposure Compensation Act (RECA) of 1990, as amended in 2000.

Veterans or their survivors can file claims for compensation by contacting the Waukesha County Veterans Service Office at (262) 548-7732 or the VA Regional Office at 1-800-827-1000 or visiting VA’s Website at www.va.gov.

QUESTIONS AND ANSWERS:

What prompted VA to change these regulations?

VA made the changes to ensure the rules governing federal benefit programs were applied consistently and fairly and so veterans exposed to radiation during military service would have the same burden of proof for these five cancers as civilians covered under the Radiation Exposure Compensation Act (RECA), as amended.

What do these new rules mean for veterans?

It means veterans who participated in a radiation-risk activity, and is later diagnosed with one of the cancers on the list are presumed to have contracted their illness from that service-connected exposure and are eligible for disability compensation.

How many diseases are on VA’s list?

The addition of the five new cancers, bone, brain, colon, lung and ovarian, bring the total of presumptive diseases to 21.

Who is covered by RECA?

RECA applies to certain residents of Nevada, Utah and Arizona who lived downwind from the Government’s above-ground nuclear tests, underground uranium miners, and persons who participated onsite in an atmospheric detonation of a nuclear device and contracted a specified disease.

How much will these changes cost in terms of benefits?

We estimate a total benefits cost of approximately \$769 million over ten years.

How about the administrative costs?

Based on workload projections, we estimate a cost of \$34 million over the ten-year period.

How much disability compensation would a veteran exposed to radiation be eligible to receive?

Rates of compensation depend upon the degree of disability and follow a payment schedule applicable to all veterans. Disability ratings are in increments of 10%.

What other services, in addition to the disability compensation, does VA offer these veterans?

Veterans are provided health care for their exposure-related illness without regard to age, service-connected status, or income level and no co-payments are required. In addition, VA maintains a registry program for veterans exposed to ionizing radiation, and veterans on the registry are provided a complete physical examination. As of the beginning of 2000, nearly 22,000 veterans had received this special examination.



Final Regulation Change: Diseases Specific to Radiation Exposed Veterans

The following information was taken from March 14, 2002 Letter

The purpose of this letter is to announce that on January 25, 2002 VA published a final regulation change (RIN 2900-AK64) that would expand the list of radiation-related diseases for which VA provides presumptive service connection.

What Does the Final Regulation Change Do?

This final regulation change will:

- ◆ Add cancers of the bone, brain, colon, lung and ovary to that list, which is found in 38 Code of Federal Regulations Sec. 3.309(d)
- ◆ Expand the definition of “radiation-risk activity” in

3.309(d), to include exposure to radiation related to underground nuclear tests at Amchitka Island, Alaska before January 1, 1974, and service at gaseous diffusion plants in Paducah, Kentucky; Portsmouth, Ohio; and Oak Ridge, Tennessee

When Will the Regulation Change Go into Effect?

This final regulation has been designated “economically significant” by the Office of Management and Budget, so the effective date must be delayed by 60 days following publication. This delay is required by the Congressional Review Act. Therefore, the effective date will be March 26, 2002.

VA Changes Copayments for Outpatient Care and Medications

The following information was taken from the Dept. of Veterans Affairs VA's Qs & As December 2002



Why is VA changing the outpatient and medication copayments?

Congress gave the VA Secretary the authority to change both the outpatient and medication copayments in Public Law 106-117 (November 1999). The final regulation concerning medication copayments was published in the

Federal Register on December 6th. After reviewing industry standards, VA believes that the medication copayment should be increased from \$2 to \$7. However, VA found that the current outpatient copayments of \$50.80 were too high for primary care. Consequently, VA is readjusting both copayments to provide fair and equitable costs for veterans who must make copayments.

Why have a three-tier system of outpatient copayments?

The three-tier system eliminates barriers for veterans to get the preventive care they need and lowers their cost for a primary care visit to a much more reasonable fee of \$15. At the same time, VA is essentially retaining a \$50 copayment for more expensive health care such as outpatient surgery.

Can you give examples of what kind of care is provided at each of the tiers?

The first tier, which is free, would include preventive screening and immunizations; screenings for hepatitis C, breast cancer, and cervical cancer; laboratory, flat film radiology services and EKG's.

A primary care visit, or the second tier that will cost \$15, includes diagnosis and management of acute and chronic conditions, overall care management and the large majority of personal health care needs.

The final tier, which will cost \$50, is for specialty care that is provided only through a referral from a primary care provider. Examples of specialty care include ambulatory surgery, computerized axial tomography (CAT) scan, MRI's, audiology, optometry and care by specialists.

Is a medication copayment charged for all items received from VA pharmacies?

No, a medication copayment is only charged for prescriptions and over-the-counter medications furnished on an outpatient basis. Copayments are not charged for medical supply items, such as diabetic supplies. Additionally, veterans receiving medications prescribed for service-connected disabilities are not charged copayments.

Can I bring a prescription from my non-VA health care provider and have it filled at a VA pharmacy to take advantage of the low medication copayment?

Generally, no. To be filled in a VA facility, prescriptions must be written by a VA health care provider. However, homebound veterans receiving VA's "Aid and Assistance" benefits or other homebound benefits can bring in a prescription from a private provider and have that prescription filled in a VA pharmacy.

I use the VA mail-in pharmacy for my refills. Is there a different medication copayment for using the mail-in pharmacy?

(Continued on page 5 - VA Changes)

(VA Changes—Continued from page 4)

No. The medication copayment is the same for mail-in pharmacy service as it is for medications picked up at the VA hospital or outpatient clinic.

How do I make copayments?

There are several payment options. 1) Payment can be made at the time you drop off your prescription or visit your health care provider. You can pay with cash, check or charge card. 2) You can receive a monthly billing statement in the mail. The payment address is printed on the statement.

Where does the copayment go?

Every dollar collected from outpatient and medication copayments is returned to the VA facility where you receive your medical care. The copayment collections are used to improve medical care for veterans.

Is there a yearly cap on the amount I will have to pay for medications?

There is an \$840 yearly cap for veterans enrolled in Priority Groups 2-6. The purpose of the annual cap is to help eliminate financial hardships for veterans in unusual circumstances who need a significant number of prescriptions. The cap is based on a veteran who averages more than ten prescriptions a month. There is no annual cap for veterans in Priority Group 7.

Will the amount of the copayment and the annual cap ever change?

The amount of the medication copayment and the annual cap may be changed on an annual basis. Copayments could increase with inflation, along with caps, based on the Prescription Drug portion of the Consumer Price Index.

Are there any changes in the inpatient copayments?

There are no changes in the inpatient copayments. Currently, some veterans pay \$792 for each 90 days of hospital care. In addition to this, there is a \$10 a day per diem charge. For each subsequent 90 days of care in the same fiscal year, the charge is \$396, or half the cost of the first 90 days.

Who has to make medication copayments?

Medication copayments are charged for medications received on an outpatient basis for nonservice-connected conditions. Medication copayments are NOT charged for service-connected veterans rated 50 percent or greater, for any service-connected condition or for veterans whose income is lower than the VA pension level.

What about outpatient copayments? Who is exempt from making those?

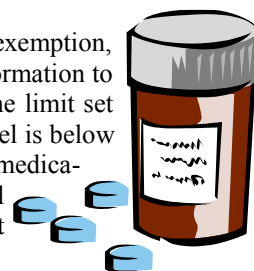
As mandated by law, the following veterans are not subject to

the copayment requirements for inpatient hospital care or outpatient medical care:

- ◆ Veterans with a compensable service-connected disability;
- ◆ Veterans who are former prisoners of war;
- ◆ Veterans awarded a purple heart;
- ◆ Veterans who were discharged or released from active military service for a disability incurred or aggravated in the line of duty;
- ◆ Veterans who receive disability compensation under 38 U.S.C. 1151;
- ◆ Veterans whose entitlement to disability compensation is suspended pursuant to 38 U.S.C. 1151, but only to the extent that the veteran's continuing eligibility for care is provided for in the judgment or settlement described in 38 U.S.C. 1151;
- ◆ Veterans whose entitlements to disability compensation are suspended because of the receipt of military retirement pay;
- ◆ Veterans of the Mexican border period or of World War I;
- ◆ Veterans who VA determines are unable to defray the expenses of necessary care under 38 U.S.C. 1722(a); and
- ◆ Veterans receiving care under 38 U.S.C. 1710(e) on the basis that they are a Vietnam-era herbicide-exposed veteran, a radiation-exposed veteran, a Gulf War veteran or post Gulf War combat-theater veteran.

How do I apply for the low-income exemption from copayments?

To be considered for the low-income exemption, you must agree to provide income information to VA. VA compares your income to the limit set by law every year. If your income level is below this limit, you are exempt from the medication copayment. If your income level is higher than this limit, you are not exempt.



Additionally, certain veterans with short-term financial hardships may be eligible for a waiver of the copayment. To obtain information regarding a waiver, contact your local VA health care facility.

When will both the outpatient and medication copayment regulations be effective?

The final regulation for medication copayments was published in the *Federal Register* on December 6 and will become effective on February 4, 2002.

The regulation outlining outpatient copayments also was published December 6 in the *Federal Register*, but it became effective immediately. The normal regulatory process was speeded up through a process called an "interim final rule," which means the regulation was considered approved as soon as it was published.

Desert Shield, Desert Storm Vets Have Higher Rate Of ALS

The following information was taken from DVA News Release of December 10, 2001

WASHINGTON—In a large epidemiological study, researchers supported by both the Department of Veterans Affairs (VA) and the Department of Defense (DoD) have found preliminary evidence that veterans who served in Desert Shield-Desert Storm are nearly twice as likely as their non-deployed counterparts to develop amyotrophic lateral sclerosis (ALS), commonly called Lou Gehrig's Disease.

VA, working with DoD, studied nearly 2.5 million veterans for this investigation.

"I am pleased that VA is once again making a major contribution that will benefit veterans and, in fact, all Americans," said Secretary of Veterans Affairs Anthony J. Principi. "I am committed to doing research that provides a better understanding of diseases that affect veterans and providing disability compensation as early as possible."

"This research is a product of a significant investment by DoD and VA over the past several years and reflects our commitment to investigate the medical problems and health concerns of Gulf War veterans," said Dr. Bill Winkenwerder, Jr., the Assistant Secretary of Defense for Health Affairs. "Scientific research helps answer veterans' questions and hold the promise for better protection of the health of our men and women during future deployments."

Both VA and DoD fund and operate programs dedicated to studying Gulf War illnesses and the effect of continuing deployments on the health of men and women who have served in the armed forces.

This study, begun in March 2000, involved nearly 700,000 service members deployed to Southwest Asia, and 1.8 million who were not deployed to the Gulf during the period Aug. 2, 1990 to July 31, 1991.

The study found 40 cases of ALS among deployed veterans. Although the researchers found the risk of ALS to be twice as high for deployed veterans, it is a rare disease and the number of affected individuals is small. Scientists would expect to find 33 cases in a similar-sized population over the same time period.

"These findings are of great concern and warrant further study," Principi said. "I intend to make certain that VA's medical resources and research capabilities are fully focused on this issue."

He said he would also explore VA's options for compensating veterans who served in the Gulf and who subsequently develop ALS.

ALS is a fatal neurological disease that destroys the nerve cells that control muscle movement. Neither a cause nor an effective treatment for ALS is known.

The investigation, jointly funded by DoD and VA for \$1.3 million, included case reviews, examinations and at-home interviews of the participants.

QUESTIONS AND ANSWERS:

As a result of this study, will VA take steps to compensate Desert Shield-Desert Storm veterans who were deployed to the S.W. Asian Theater between August 2, 1990 and July 31, 1991, found to be suffering from ALS?

Yes. We will act in a way that will get the benefits to veterans and their survivors in the shortest time possible. VA will immediately undertake extensive outreach to those who have been identified by this study to assist them in filing new claims or reactivating existing claims for benefits.

What geographical area of service would be covered in establishing eligibility for compensation for ALS?

Veterans who served from August 1, 1990 through July 31, 1991 in the Southwest Asian theater of operations will be eligible. The theater of operations includes Iraq, Kuwait, Saudi Arabia, the neutral zone between Iraq and Saudi Arabia, Bahrain, Qatar, the United Arab Emirates, Oman, the Gulf of Aden, the Gulf of Oman, the Persian Gulf, the Arabian Sea, the Red Sea, and the airspace above these locations (38 C.F.R. § 3.317(d)(2)).

How and where are these claims going to be processed?

Claims will be processed at VA Headquarters in Washington D.C.

What about veterans deployed during this period that were not identified through this study?

This was a large study that sought to cover all active-duty military and mobilized reserves and National Guard who served for at least one month in the Gulf theater of operations during the relevant period, and had a diagnosis of ALS. There were a small number of potential claimants, however, who were contacted, but chose not to participate in the study. To the extent that we can identify them, we intend to engage in outreach to these potential claimants as well and offer them assistance in determining whether they might have a valid claim for benefits.

Will VA be issuing a regulation to implement a presumption of service connection as a result of this study?

Because we do not want to delay providing benefits in these cases, and because the law permits us to adjudicate the claims on the basis of this evidence now, we will not be waiting for a regulation.

But what will happen when a Desert Shield-Desert Storm veteran develops ALS in the future?

In the future, veterans with ALS who served in Southwest Asia during this period may be able to establish direct service-connection with the evidence provided by the peer-reviewed study.

(Continued on page 7 - ALS)

New Law Concerning Eligibility for Headstones and Markers

The following information was taken from the VA Web Page <http://www.cem.va.gov/hmlaw.htm>

On December 27, 2001, President Bush signed Public Law 107-103, the Veterans Education and Benefits Expansion Act of 2001.

This law includes a provision that allows the Department of Veterans Affairs (VA) to furnish an appropriate marker for the graves of eligible veterans buried in private cemeteries, whose deaths occur on or after December 27, 2001, regardless of whether the grave is already marked with a non-government marker.

VA is now accepting applications for markers under the provisions of Public Law 107-103. VA Form 1330, Application for Standard Government Headstone or Marker for Installation in a Private or State Veterans' Cemetery, must be submitted by the next of kin, funeral director or cemetery representative, along with a copy of the veteran's military discharge documents, to request a Government-provided headstone or marker. Do not send original documents, as they will not be returned. Until this form is revised,

applicants should ignore references to "unmarked graves" and should note in Box 27, Remarks that this will be a second marker to mark a veteran's gravesite.

This new provision will be codified at 38 U.S.C. § 2306(d).



(ALS—Continued from page 6)

This study covers a very narrow period of time, only a one-year period from the summer of 1990 to the summer of 1991. What if a veteran who served in the Gulf outside of that period of time were to develop ALS? Could such a veteran receive service connection?

Currently, we have no evidence to support service connection based on such deployment. Because of the unique environmental exposures that occurred during this time, the Desert Shield and Desert Storm periods were studied and the results relate only to those periods.

Why did it take VA so long to study the ALS rate among Desert Shield-Desert Storm veterans? Reports of ALS among Gulf War veterans have been circulating for a long time.

VA takes very seriously everything that veterans have to say about their medical problems. This is a very rare disease and consequently there have been very few cases to study. The initial reports about ALS often depended upon anecdotes about the cases of ALS among Desert Shield-Desert Storm veterans without numbers of cases that were medically verified.

Two previous mortality and hospitalization studies failed to show a connection between ALS and service in the Gulf region. Nevertheless, VA researchers became convinced the issue merited a special review. However, the study does not address the cause of ALS, nor does the medical community understand the etiology of this disease. VA will continue to sponsor research into this subject.

What caused the ALS among Desert Shield-Desert Storm veterans?

We don't know. The cause of this disease is unknown in the general population. In a small proportion of cases, there is a family history of ALS. Some studies have evaluated if occupational exposures could contribute to ALS, but the results have not been conclusive. The next stage in this Gulf War study will be to analyze the family and occupational history of the study participants.

I'm a Desert Shield-Desert Storm veteran. What are my chances of contracting ALS?

Despite the increased risk identified in this study, the number of veterans likely to develop ALS is very small. This study suggests that less than seven individuals per million per year (7/1,000,000/year) are expected to be at risk for developing the disease.

What can VA do, right now, to help Desert Shield-Desert Storm veterans with ALS?

VA can provide medical care and compensation VA has the legal authority already to provide disability compensation for these veterans and medical care. Although VA will make every effort to contact ALS victims who took part in the recent study, veterans or family members who believe they qualify should contact the nearest VA medical center, or regional benefits office.

How can Desert Shield-Desert Storm veterans with ALS contact VA?

They can call VA's toll free number: 1-800-827-1000.

(OPA) ALS is a progressive, fatal disease. What about their families?

VA is committed to caring for the survivors of any Desert Shield-Desert Storm veterans who died of this disease and will be working to develop eligibility criteria for Dependency and Indemnity Compensation (DIC), enrollment in VA's health-care program for survivors, called CHAMPVA, educational assistance, vocational assistance and access to the GI Bill home loan program.

(OPA) Will benefits for ALS victims and family members be retroactive?

Federal law determines who receives VA benefits and how financial payments must be calculated. As a rule, when VA provides compensation to veterans or their survivors, the benefits only go back as far as the date of the claim for those benefits.

TRICARE Policy Execution Concerning National Guard and Reserve TRICARE Prime Enrollment During OPERATION ENDURING FREEDOM/NOBLE EAGLE

The following information was taken from Thomas F. Carrato, Executive Director's TRICARE Management Memo of December 20, 2001



This memorandum clarifies the enrollment policy for Reservists and Guard Personnel hereafter referred to as Reserve Component members, who were called to active duty to support subject operations primarily to fill one of two roles: 1) deploying to the overseas area of responsibility to directly participate in operations; or 2) deploying within the United States, to either perform their primary mission, or to backfill deploying active duty personnel. This policy execution letter clarifies the TRICARE Prime enrollment status of members and their families in each situation.

Reserve Component Members Activated in the United States and Deployed Overseas: Members in this status will be enrolled in TRICARE Prime, or Prime Remote, if applicable, at their mobilization/inprocessing point. Regardless of the duration of deployment, this enrollment will not be transferred to an overseas region. Reserve Component units should work with the applicable TRICARE Regional Office (Office of the Lead Agent) to coordinate mobilization/inprocessing point enrollments and TRICARE educational material and briefings to members. Claims for personnel deployed overseas during call-ups will be processed through Wisconsin Physician Services. If reserve personnel present at overseas locations were not enrolled at their mobilization/inprocessing point, the medical treatment facility (MTF) must coordinate with their respective TRICARE Overseas Regional Office to ensure enrollment occurs in the region of the mobilization site. Overseas MTF's should not enroll activated Reserve Component personnel.

Reserve Component Members Activated in U.S. Territories: Members being activated in U.S. Territories will be enrolled at their mobilization/inprocessing point in TRICARE Overseas Prime. For those members remaining overseas, they will be en-

rolled in TRICARE Overseas Prime at their mobilization/inprocessing point. For members deploying within the United States, the procedures in the next paragraph apply.

Reserve Component Members Deployed Within the United States: Members in this situation will also be enrolled in TRICARE Prime at their mobilization/inprocessing point. Reserve Component units should work with the applicable TRICARE Regional Office to coordinate mobilization/inprocessing point enrollments and disseminations of TRICARE educational material, to include dental benefits, and briefings to members. Member enrollments must be transferred to their deployment site, if different from their mobilization/inprocessing point, if the member will be assigned at the deployment site for 179 days or more.

Enrollment of Family Members: Family members of reservists who are activated for more than 30 days, or Guardsmen performing full time National Guard duty for more than 30 days and being paid by the Federal Government under 32 U.S.C. 502(f) are eligible for TRICARE Standard and TRICARE Extra, beginning on the day of activation. Family members of eligible Guardsmen and Reservists activated for 179 days or more are eligible to enroll in TRICARE Prime, and may be eligible for TRICARE Prime Remote, beginning on the day of activation. Family members will be enrolled in the Region where they live. Existing TRICARE Prime and TRICARE Prime Remote enrollment procedures will apply.

TRICARE Management Activity points of contact for this are Mr. Mike Talisnik or Major Bob Slough at (703) 681-0064.

Navy & Marine Corps WWII POWs May be Eligible for Back Pay

The following information is by Michael McLellan, NAVPERSCOM Public Affairs

A number of Sailors and Marines who were held as prisoners of war (POW) during World War II (WWII) are authorized to receive promotion back pay under the provisions of the fiscal year 2001 Floyd D. Spence Defense Authorization Act. The act directs the Department of the Navy to pay back pay to Navy and Marine Corps personnel who were selected for promotion but not available to accept the promotion because of their internment.

Only Navy and Marine Corps POWs during WWII, Dec. 7, 1941 to Dec. 31, 1946, are eligible. If the servicemember is de-

ceased the surviving spouse is entitled to the back pay. The amount of the back pay will be determined using the amount the member would have been paid calculated using WWII pay rates and not adjusted for inflation.

Department of the Navy will determine eligibility for back pay by researching each individual's request. This will include obtaining and reviewing the member's archived personnel and pay records.

Applications from Navy personnel should be sent to Commander John DeNicola (P62W) at Bureau of Naval Personnel,

Retired Activities Branch-PERS-62, 5720 Integrity Dr., Millington, TN 38055. Marine applications should be sent to Major Jeff Sokoly Headquarters, U.S.M.C., 2 Navy Annex, RFL-F7, Washington, DC 20380-1775

Additional information regarding the program and application procedures may be obtained by writing CDR DeNicola or calling (800) 762-8567. Maj. Sokoly can be reached at (866) 472-7139. Application information and forms are available on the internet at <http://www.bupers.navy.mil/pers62/WWIIPOW/WWIIPOW.html>.

NEWS UPDATE FOR MILITARY RETIRED PROGRAMS



Introducing: TRICARE for Life

The following information was taken from TRICARE News Fall 2001 Issue 2

The Department of Defense has recently implemented sweeping improvements to the TRICARE program. On October 1, 2001, a new TRICARE entitlement, TRICARE For Life, began for uniformed service retirees, eligible family members and survivors who are Medicare-eligible and who have purchased Medicare Part B.

TRICARE For Life is a permanent healthcare benefit that generally acts as a secondary payer to Medicare. There are no enrollment fees or monthly premiums for TRICARE For Life, although the monthly fee for Medicare Part B remains in effect.

KEY FEATURES:

TRICARE For Life medical benefits will provide the following coverage:

- ◆ If the medical care received is a benefit of both Medicare and TRICARE, Medicare will pay the Medicare allowable amount for the care received, less any applicable cost share or deductible. TRICARE will pay Medicare cost shares and deductibles

for the service rendered. Medicare and TRICARE cover most, but not all, of the same medical services.

- ◆ If the medical care received is a benefit of Medicare, but not TRICARE, Medicare will pay its usual amount, and the beneficiary will be responsible for the Medicare cost shares and deductibles. TRICARE pays nothing. An example of this type of coverage is chiropractic care.
- ◆ If the medical care received is a benefit of TRICARE, but NOT a benefit of Medicare, Medicare pays nothing. TRICARE will pay the TRICARE allowed amount for the service received. In this case, the beneficiary must pay the applicable TRICARE cost shares and deductibles. An example of this type of coverage is the prescription drug benefit.

TRICARE For Life Generally Pays As:

- ◆ Primary payer when a service is a TRICARE covered benefit, but not a Medicare covered benefit.
- ◆ Secondary payer when a service is a benefit of both Medicare and TRICARE.
- ◆ Third payer when a service is covered by a Medicare supplemental policy or other health insurance.

Other Recent Enhancements to TRICARE Benefits

The following information was taken from TRICARE News Fall 2001 Issue 2

TRICARE Senior Pharmacy Program—Effective April 1, 2001, the pharmacy benefit provides Medicare-eligible retirees of the uniformed services, their family members and survivors the same pharmacy benefit as retirees who are under age 65. It includes access to prescription drugs, not only at military treatment facilities, but also at retail pharmacies and through the National Mail Order Pharmacy program (NMOP).

All beneficiaries who turned 65 prior to April 1, 2001, automatically qualify for the benefit, whether or not they have purchased Medicare Part B.

All beneficiaries, who turned 65 on or after April 1, 2001, must be enrolled in Medicare Part B to receive this benefit.

Prime Active Duty Family Member Copayment Waiver—Effective April 1, 2001, active duty family members enrolled in TRICARE Prime are no longer liable for copayments for their inpatient and outpatient care. Active duty family members will continue to have copayments for their prescriptions and the normal Point of Service charges will still apply for active duty family members who use this option.

TRICARE Prime Remote (TPR) for Active Duty Family Members—Active duty family members residing more than 50 miles from a military treatment facility with their TPR-eligible active duty sponsor will be eligible to enroll in TRICARE Prime Remote for Family Members.

This benefit offers the same copayment schedule and benefits as TRICARE Prime. The anticipated date of implementation is April 1, 2002.

TRICARE Prime Remote Family Member Copayment Waiver—All copayments, cost shares and deductibles will be waived for eligible active duty family members who live more than 50 miles from a military treatment facility with their TPR-eligible active duty sponsor. This benefit applies for claims with dates of service from October 30, 2000 until the TRICARE Prime Remote for Family Members program is implemented. To take advantage of this benefit, eligible family members must use TRICARE network or authorized providers (if they are available).

Reduce Your Prescription Costs with the National Mail Order Pharmacy

The following information was taken from TRICARE News Fall 2001 Issue 2

The NMOP, a Department of Defense program administered by Merck-Medco Rx Services, is a convenient and economical option for TRICARE beneficiaries. Beneficiaries who use the NMOP can have their prescription medications sent directly to their home with only a small copayment (no cost for active duty members), plus free shipping and handling! The NMOP can provide most prescription medications in either a 90-day supply (noncontrolled substances) or a 30-day supply (narcotic medications). Out-of-pocket costs for up to a 90-day supply total only \$9 for brand name drugs, or \$3 for generic drugs, compared to a 30-day supply for the same copayment at a neighborhood network pharmacy. These

modest out-of-pocket expenses compare favorably with the higher costs of prescriptions filled at non-network retail pharmacies, which include annual deductibles of \$150/individual or \$300/family and 20% cost shares.

Of course, the best value for all beneficiaries remains the military treatment facility (MTF) pharmacies, where TRICARE beneficiaries can get prescriptions filled without any out-of-pocket costs. However, in some cases, more expensive medications that are not supplied at the MTF may be obtained by mail through the NMOP. In addition, the NMOP is highly recommended for "maintenance" medications, such as those prescribed for

control of blood pressure or cholesterol.

While the NMOP remains the most economical way for TRICARE beneficiaries to fill their prescriptions outside the MTF, statistics show that beneficiaries in TRICARE Regions 2 and 5 only utilize NMOP for 9 percent of their prescription needs. So spread the word and give the NMOP a try! To register for the NMOP or to request more information, call Merck-Medco Member Services at 800-903-4680 or visit the web site at www.merck-medco.com, visit the DoD Pharmacy web site at www.pec.ha.osd.mil and click on the "DoD Pharmacy Benefit information" selection, or pick up a registration form at the local TRICARE Service Center.

The Crime of Health Care Fraud Affects Us All

The following information was taken from TRICARE News Fall 2001 Issue 2

Most health care providers subscribe to the highest code of ethical standards. But as in any large population, there are some individuals who intentionally seek to defraud the system. In fact, it is estimated that between 7% to 10% of the 1.1 trillion annual health care expenditures in the United States are fraudulent. Health care fraud cases are so damaging to the United States economy that the U.S. Department of Justice has made health care fraud investigation one of its top priorities, second only to violent crime. (*Federal Bureau of Investigation web site* <http://www.fbi.gov/contact/fo/norfolk/hcf.htm>)

The crime of health care fraud harms us all. Some of the ways it affects us are:

- ◆ Higher taxes
- ◆ Higher cost for medical services
- ◆ The potential for false medical histories in patients' records

Health care fraud is defined as: *"An intentional act of misrepresentation or deception that results in a higher benefit to the beneficiary, the provider, or some other entity."*

Examples of fraudulent and abusive practices include:

- ◆ Medical providers charging more than once for the same service (double billing)
- ◆ Medical providers charging for services that were never performed or medical equipment/supplies that were never ordered
- ◆ Medical providers performing inappropriate or unnecessary services
- ◆ Medical providers falsifying a patient's diagnosis in order

to bill for a non-covered procedure

- ◆ Callers offering free services or medical equipment in exchange for your policy number.
- ◆ Suppliers providing lower cost or used equipment while billing for higher cost or new equipment

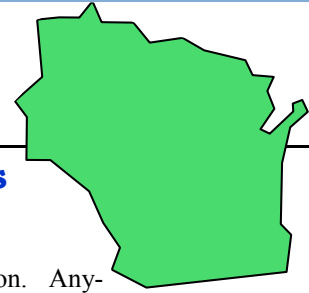
Guidelines to help prevent fraud and abuse:

- ◆ **Always review your Explanations of Benefits (EOBs) and medical bills to ensure that they indicate the correct providers and dates for the services that you received.** If you have questions about your bill, contact the doctor who provided the services, or the PGBA Claims Line, 800-613-7124.
- ◆ Keep track of every bill received or paid by your insurance provider to make sure that you are not billed more than once for the same service.
- ◆ Don't be afraid to question your health care provider about the necessity of each procedure that is being ordered for you, especially if it seems excessive.
- ◆ Do not accept a discount of medical payments or the waiver of your copayment unless you are assured that the discounted amount is reflected on the billing for your health care provider.

If you feel that you may have been victimized by fraudulent activities, you may contact the Humana Military Healthcare Services Fraud Hotline at 800-333-1620.



NEWS UPDATE FOR STATE BENEFITS



CVSO Association Advocacy Award Nominations

The following information was received from the CVSO Association of Wisconsin

The County Veterans Service Officer (CVSO) Association of Wisconsin is accepting nominations for its *Veterans Advocacy Award*.

Nominees for the award need not be a veteran. However, they must provide, or have provided outstanding service to veterans and their families, and have demonstrated a high degree of compas-

sion for their constituents.

Nominations are limited to three pages, including a narrative of not more than two double spaced pages and an identification page. The identification page will include the nominee's name, address, telephone number and occupation, as well the name, address and telephone number of the individual submitting the

nomination. Anyone may submit a nomination.

Deadline for submitting nominations is June 1, 2002, and nominations should be sent to:

Robert P. Stone
CVSO Association of WI
311 E. Miner Ave., Suite C230
Ladysmith, WI 54848

Wisconsin Veterans Home Open House

The following information was taken from The Courier Volume 02 Issue 03

The Wisconsin Veterans Home will host its annual Open House celebration on May 19, 2002. Everyone is cordially invited to attend the festivities and participate in the many activities during the day. The Veterans Home is located on County Road QQ, just south of Waupaca.

Highlights of the day include a non-competitive antique car show with 125 old cars expected to be on display. A dunk 'em tank, food booths, military vehicles, equipment displays and games will provide something of interest for everyone.

Through the courtesy of Clearwater Harbor owner, Pat Meighan, "The Chief Waupaca", an authentic stern-wheel cruiser, will give boat rides on the beautiful Chain O' Lakes. Weather permitting, departures will be at 11:00 a.m., 12:00 noon, 1:00 p.m. and 2:00 p.m. from the Veterans Home dock. Free tickets for boat rides will be available near the dock prior to each scheduled ride. Inquire early upon your arrival about tickets because these rides always fill up early.

Tours of the Home grounds, Commissary, Central Kitchen, Fire Department and Therapy Departments will be available throughout the day. The public is also invited to tour the Wisconsin Veterans Home Museum, participate in the clown makeup booth, bowling, bingo, boat rides and other indoor and outdoor activities. Many of the handcrafted items made by the members of the Wisconsin Veterans Home will be for sale in the Gift Shop at the Marden Memorial Center. Bratwurst and hot dogs will be sold in the park from 11:00 a.m. until sold out.

Many lifelong residents of Wisconsin have never visited the Wisconsin Veterans Home, which is one of the largest employers in the area. If you have ever wondered about the many services we provide for Wisconsin's aging and disabled veterans, this would be an excellent opportunity for the whole family to visit the facility and see why federal V.A. officials have referred to the Wisconsin Veterans Home as the finest veterans health care facility in the nation.

If you have any questions or require further information, feel free to call Public Information Officer Rich Calcut at (715) 258-4247.



Wisconsin Veterans Can Get 6.5% Home Mortgage Loans

The following information was received from the Wisconsin Dept. of Veterans Affairs—Madison



The Wisconsin Department of Veterans Affairs (WDVA) now has \$15 million available for home mortgage loans with an interest rate of 6.5 percent, WDVA Secretary Raymond Boland announced.

In addition to the low interest rate, WDVA home mortgage loans offer several advantages to Wisconsin veterans such as no requirement for private mortgage insurance, no discount points, no funding fee, and a fixed rate of interest for the 30-year term.

"The monthly payments on a WDVA home loan may be substantially lower than a conventional loan. Beside the low interest rate, there is no requirement for mortgage insurance, which is a significant savings," Boland said.

The loan must be used to buy or build the veteran's principal residence. It may not be used to refinance an existing mortgage. The WDVA requires at least a 5 percent down pay-

ment. WDVA home mortgage loans do not have maximum income limits, so higher income veterans may qualify. However, the amount of the WDVA home mortgage loan may not exceed \$278,500.

To fund its home mortgage loans, the WDVA recently sold \$15 million of bonds to the Wisconsin Board of Commissioners of Public Lands, which administers trust funds that provide investment income to Wisconsin's public school libraries. The trust funds currently total about \$470 million and are invested mainly in loans to local government and school districts (\$300 million), state veterans affairs' bonds (\$35 million) and Lambeau Field renovation bonds (\$100 million). Members of the Board of Commissioners of Public Lands are Attorney General James Doyle, Secretary of State Douglas LaFollette and State Treasurer Jack Voight.

This cooperation between the WDVA and the Wisconsin Board of Commissioners of Public saved \$150,000 in bond underwriting fees, and this \$150,000 now may be used for more home loans to veterans.

The WDVA also offers home improvement loans with a 7.45 percent interest rate. Veterans may borrow up to \$25,000 with 15 years to repay for a variety of alterations, construction and repairs of their principal residence, including garage construction. Veterans now may have more than one WDVA home improvement loan if they have sufficient equity and can repay multiple loans. To obtain WDVA home loans, veterans must meet military service and state residency requirements set by the Wisconsin Legislature.

For more information about WDVA home mortgage and home improvement loans, contact the nearest county veterans service office (listed in the phone book under county government). More information is also available on the WDVA Web site and <http://dva.state.wi.us> or by calling the WDVA toll free at 1-800-947-8387.



WISCONSIN VETERANS MUSEUM—CALENDAR OF EVENTS



ALL EVENTS ARE HELD AT:
(Unless otherwise specified)

THE WISCONSIN
VETERANS MUSEUM
30 W. MIFFLIN ST
MADISON WI 53703
(Across from the Capitol)

SERVICES:

Gallery & Gift Shop Hours:

Monday—Saturday (year-round)
9 a.m.—4:30 p.m.
Sunday (April—September)
Noon—4:00 p.m.

ADMISSION: Free for museum and programs unless otherwise specified.

GUIDED TOURS: Available for groups of 10 or more.

Advance reservations required.

Research Center

Tuesday & Thursday (Year-round)
10 a.m.—3 p.m.

Call to schedule an appointment

FOR INFORMATION CALL:

608-267-1799

WEB PAGE

<http://museum.dva.state.wi.us>

NEWS UPDATE FOR THE LOCAL AREA



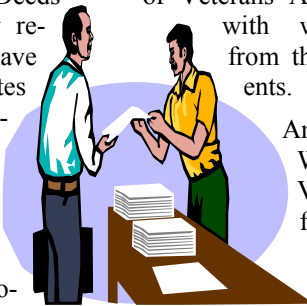
Veterans Encouraged to Record Their Military Discharge Papers (DD214's) With Their Local County Veterans Service Office

The following information was received from: Wisconsin Dept. of Veterans Affairs

Waukesha --- For decades, veterans have registered their military discharge papers (DD214 Report of Separation from Active Duty) with the County Register of Deeds for safekeeping and easy retrieval. Recently, there have been reports in other states that unauthorized individuals may have obtained personal information from veterans' DD214's under public record laws.

In Wisconsin, state law protects the privacy and confidentiality of veterans' DD214's registered with the county. According to the Wisconsin Department of Veterans Affairs (WDVA), the law states

that the discharge certificate shall be accessible only to the veteran or his or her dependents, the county veterans' service officer, the Department of Veterans Affairs, or any person with written authorization from the veteran or dependents.



Any DD214's that the WDVA or the County Veterans' Service Office have in their possession are also confidential documents under state law.

"Veterans who have not done so should register their DD214's with the county free-of-charge to ensure safekeeping of this important docu-

ment, which is used to obtain veterans' benefits from the state and federal government," says John L. Margowski, County Veterans' Service Officer. "The confidentiality and privacy of the document are well protected under state law."

Waukesha County veterans may register their DD214 by contacting the Waukesha County Veterans' Service Office, located in the Human Service Center, 500 Riverview Avenue, Room G138, Waukesha, WI 53188-3680, or call 262-548-7732. Also, see our web site at www.waukeshacounty.gov/veterans. More information is also available on the WDVA web site at <http://dva.state.wi.us>.

2002 Loyalty Day Parade



WHEN: SATURDAY, APRIL 27

WHERE: PEWAUKEE, WI

PARADE ROUTE: VFW Post on Clark Street to the Lake Front.

Posts of the Department of Wisconsin VFW and Community Groups throughout Wisconsin will display patriotic pride with a parade on Loyalty Day.

Sponsored by Pewaukee VFW and Auxiliary Post #9537. For more information, call the Post at (262) 691-1463.

Iola Vintage Military and Gun Show

WHEN: AUGUST 17-18, 2002

WHERE: IOLA OLD CAR SHOW GROUNDS, IOLA, WI

ADMISSION:

Adults \$4

Children 6 to 12 \$2

Children Under 6 Free

**FREE
PARKING**



**HISTORICAL VEHICLES &
MEMORABILIA WITH
OLD WORKING WHEELS**

ACTIVITIES:

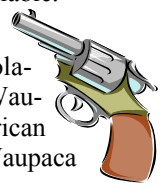
- Battle Reenactments
- Radio Control Model Aircraft

- Helicopter Rides
- Parade of Military Vehicles
- Genuine G.I. Breakfast of S.O.S.

Food service will be available from 11 a.m. to 6 p.m. Friday, 6 a.m. to 6 p.m. Saturday, and 6 a.m. to 5 p.m. Sunday. Brats, hamburgers, cheeseburgers, hot dogs, barbecues, chicken fillet, chips, ice cream, and beverages will be available.

Sponsored by: Iola American Legion, Iola-Scandinavia VFW, Wau-paca VFW, Iola American Legion Auxiliary, Waupaca VFW Auxiliary

For more information call (715) 445-4005.



The Moving Wall Coming to Oconomowoc

The following information was received from: VVA Chapter 635

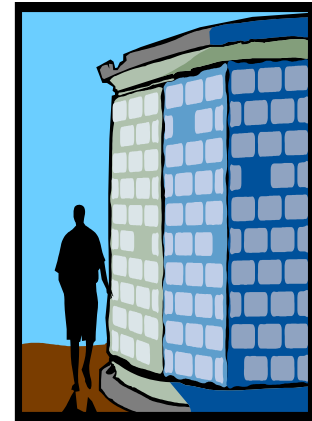
VVA Chapter 635 is proud and pleased to announce that the Moving Wall will be on display at the Oconomowoc High School from Friday, September 27th, 2002 until Thursday, October 3, 2002.

Any veterans group who wishes to participate in the Opening Ceremonies on Saturday, September 28th, our POW/MIA Silent March and Vigil on Sunday, September 29th, or in helping us to "stand guard" at The Wall for the week that it is on display should contact any of the individuals listed.

Event Coordinator:
Pat Furno
(262) 569-9148

Chapter President:
Russ Southcott
(262) 567-7556 or
(262) 569-7026

Chapter Vice President:
Jim Fulmer
(262) 569-1969



50th Anniversary of the Korean War Volunteers Needed!

The Waukesha County Department of Veterans' Services is planning a *50th Anniversary Event* of the Korean War. The anticipated date for the event will be July 23, 2003, the day the treaty was signed.

We are seeking volunteers to assist us in planning and staging the event. If you would like to help, please call our office at 262-548-7732 and leave your name, address and phone number so we can contact you when things fall into place. ***We need help NOW! To date, we have had very little response.***

HELP HELP ... HELP HELP ... HELP HELP ... HELP

Any Month—2001						
Sun	Mo	Tue	We	Thu	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

VETERAN'S CALENDAR OF EVENTS! FREE Advertisement— for Your Post or Organization

FREE ... FREE ... FREE ... FREE ... FREE

Visit the Waukesha County Veterans Services' Website at: www.waukeshacounty.gov. Click on the Veterans' Services Web page and you will find the Veterans' "Calendar of Events". If you have an event or function that you would like to have put into the calendar contact our office by phone or e-mail

Waukesha County Veterans Service Office
500 Riverview Avenue
Waukesha WI 53188
Phone: 262-548-7732
Fax #: 262-896-8588
E-mail address:
jmargowski@waukeshacounty.gov

Town of Genesee Veterans' Memorial

The following information was received from: The Bralick-Miller Post 5270 VFW



The Bralick-Miller Post 5270 of the Veterans of Foreign Wars (VFW) has acquired a 155MM Howitzer from the U.S. Government. The VFW has presented the Howitzer to the Town of Genesee for display in the town park.

This field artillery piece is now the centerpiece of a memorial to veterans of all wars. The memorial consists of the Howitzer surrounded by a patio of plain and inscribed bricks.

The VFW post is extending an invitation to everyone to share in this memorial. You can be a part of this endeavor by purchasing a brick inscribed with the lettering of your choice.

There are two different brick sizes:

- ◆ The 4" x 8" brick has three lines of twelve characters per line and costs \$30.00
- ◆ The 8" x 8" brick has five lines of twelve characters per line and costs \$60.00

*Blank spaces, periods, commas, etc.
are considered characters.*

The letters are 3/4" high and filled with black epoxy.

These bricks can be dedicated to anyone of your choosing (Non-Military are also welcome).

For questions about the Memorial or to purchase a brick for your special someone, call any of the members listed below, or contact any member of VFW Post 5270.

Lyle Roteik	Post Commander	262-695-1160
Dale Stark	Past Commander	262-691-1788
Edward Fintel	Sr. Vice Commander	262-968-3407
William Stark	Brick Chairman	262-495-3347

Please mail your request to:

Dale Stark
N17 W27318 Lakefield Dr
Pewaukee WI 53072

**Please make checks payable to:
VFW Post 5270**

Thank you for your support!

ORDER FORM FOR VETERAN'S MEMORIAL

Name: _____ Phone#: _____

Address: _____

City, State, Zip: _____

Lettering for the 4" x 8: Brick

1st Line: _____

2nd Line: _____

3rd Line: _____

Additional Lettering for the 8: x 8" Brick

4th Line: _____

5th Line: _____

WORLD WIDE WEB LINKS

VA home page	http://www.va.gov
VA consumer affairs	http://www.va.gov/customer/conaff.asp
VA public affairs & special events	http://www.va.gov/opa/

VA Benefits & Health Care Information

VA compensation & pension benefits	http://www.vba.va.gov/gln/21/
VA benefits on-line application	http://vabenefits.vba.va.gov/vonapp
Health benefits & services	http://www.va.gov/vbs/health/
Health benefits eligibility/enrollment	http://www.va.gov/health/elig/
Burial & memorial benefits	http://www.cem.va.gov
Education benefits & services	http://www.gibill.va.gov
VA home loan guaranties	http://www.homeloans.va.gov/
Veterans' claims appeals	http://www.va.gov/vbs/bva
Benefits & services outside of the U.S.	http://www.vba.va.gov/foreign/

Forms:

VA forms	http://www.va.gov/forms/
Additional government forms	http://www.vba.va.gov/pubs/otherforms.htm

Employment Assistance:

Information for veterans	http://www.opm.gov/veterans/index.htm
Veterans' hiring preference	http://www.opm.gov/veterans/html/vetguide.htm
Federal government job opening	http://www.usajobs.opm.gov
Dept. of Labor Employment & Training Services	http://www.dol.gov/dol/vets

Business Assistance:

Small Business Administration	http://www.sba.gov/VETS/
VA Office of Small & Disadvantaged Business Utilization	http://www.va.gov/OSDBU/

Other useful sites:

Burial in Arlington National Cemetery	http://www.mdw.army.mil/fs-a02.a.htm
Department of Defense	http://www.defenselink.mil/
Military funeral honors	http://www.militaryfuneralhonors.osd.mil
Military records & medals	http://www.nara.gov/regional/mpr.html
American Liver Foundation	http://www.liverfoundation.org

La version en español de este folleto	http://www.va.gov/opa/feature/index.htm
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